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PHILADELPHI	A, PA 19104-2891			(Depositor's name)			
							(Signature)
			L				(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTO	3	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/676,170 10/02/2003			Ross J. Hamel		SYNT-0108		6800
TITLE OF INVENTION	: RETRACTOR WITH	INTERCHANGEABLE I	RETRACTOR BLADES				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOT	AL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	06/29/2010
EXAM	IINER	ART UNIT	CLASS-SUBCLASS				
MAI, I	IAO D	3732	600-213000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  ☐ Change of correspondence address (or Change of Cordessondence Address form PT0/SB/122) anached.  X\$\overline{\text{2}}\$ Tee Address" indication (or "Fee Address" Indication form PT0/SB/126; We U-0-20 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			2. For printing on the pastent front page, list (1) the names of up to 3 registered patient attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered patient attorneys or agents. If no name is  listed, no name will be printed.				
	less an assignee is ident h in 37 CFR 3.II. Comj GNEE	ILIE FALEN (print of type)  data will appear on the patent. If an assignee is identified below, the document has been filled for I a substitute for filing an assignment.  (B) (RESIDENCE: (CITY and STATE OR COUNTRY)  West Chester, PA 19380					
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5. Change in Entity Sta	tus (from status indicate is SMALL ENTITY stati		☐ b. Applicant is no lo	nger claiming SMAI	I.ENTITY s	tatus Sec 37 Cl	-R 1 27(x)(2)
NOTE: The Issue Fee an	d Publication Fee (if req		d from anyone other than				e assignee or other party in
Authorized Signature	(2.d 2. H			DateJu	une 29, 2	010	
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